Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : WINDERWEEDLE, HAINES, WARD & WOODMAN'

Account Number: 076077002775

: (407)246-8678 : (407)423-7014 Fax Number

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Cmail	Address	

LP/LLLP AMENDMENT/RESTATEMENT/CORRECTION GATOR MEZZANINE FUND PARTNERS, LLLP

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$105.00

JAN 14 2010



Electronic Filing Menu

Corporate Filing Monu

Floride Dept. of State Electronic Filling Facsimile Audii No. # 000006 55193

## CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

## GATOR MEZZANINE FUND PARTNERS, LLLP Insert name currently on file with Florida Department of State

insert dame çu	mently on 11	e with Fibrius 1	separtitieth of State		
Pursuant to the provisions of section 62 limited liability limited partnership, wh November 21, 2006, as:	ose certifications igned Flori	cate was filed rida documen	with the Florida I	Department of State N06000001354	e on
adopts the following certificate of amer	ndment to i	ts certificate	of limited partners	ship.	
This amendment is submitted to amend the	following:			<u> </u>	31102
A. If amending name, enter the new nambere:	me of the li	mited partner	ship or limited liai	ollity limited partne	ership
. FLORIDA	A MEZZ	ANINE FU	ND. LLLP	83	<del>رن</del> :
			nn acceptable suffix.	Me	
Acceptable Limited Partnership suffixes: Limite Acceptable Limited Liability Limited Partnersh  B. If amending mailing address and	ip suffixes: L	Imited Liability	Limited Partnership,	Ō. S	사 양 2년 발
principal office address here:			•		
New Principal Office Address)	dress:	Suite 210	ange Avenue		
New Mailing Address: (May be post office box)		1030 N. Or Sulte 210	brida 32801 ange Avenue brida 32801		
C. If amending the registered agent and new registered agent and/or the new regis	Vor register	red office add address here	ress on our record	s, <u>enter the name c</u>	of the
Name of New Registered Agent:	Seth C	). Ellis	· ·		
New Registered Office Address:	1030 N	√. Orange A	Venue, Suite 210	)	
	•••		Florida street addre		
•		Orlando	. Florida	32801	
		City		Zip Code	
<i>,</i>			; , ;		

Page 1 of 3

Floride Dept. of State Electronic Filing Feesimile Audit No. 100.000.05.193

## New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to	
comply with the provisions of all statutes relative to the proper and complete performance of my duties, and	11
am familiar with and accept the obligations of my position as registered agent.	

Registered Agent, Signature of New Registered Agent Seth D. Ellis

	ending the general partner(s), <u>e</u> removed from our records:	nter the name and business address of ea	
<u>Tit</u>	e <u>Name</u>	Adulness	Type of Action
	<u> </u>	:	Add Remove
<del>,</del>			Add 25 29
			Add Remove
	· · · · · · · · · · · · · · · · · · ·		Add Remove
			Add Remove
			□Add □Remove
	limited partnership or limited artnership" status, enter chang	l liability limited partaership is amend se here:	ing Its "limited Hability
Th	is Limited Partnership hereby etc	ects to be a "Limited Liability Limited Par	tnership."
☐ Th	is Limited Partnership hereby re	moves its "Limited Liability Limited Partr	tership" status.
(NOTE: I	adding or removing" limited liability	limited partnership" status, all general partners	s must sign this amendment.)

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Florida Dept. of State Electronic Filing Facelmile Audit No. Hono ooo \$5193

F. If amending any other information, enter char	ge(s) here: (Attach additional sheets,	if necessary.,	,
	1		
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	· · · · · · · · · · · · · · · · · · ·		
Effective date, if other than the date of filing: (Effective date cannot be prior to nor more than 90 days after t	date of filing	da Departmen	et of
State.)	to the this dixamen is fired by the riori	ии вериттеп	<i>u</i> j
	•		2
Signature(s) of a general partner or all general pa	riners*:	25	
	•		<u>ب</u> 22
(*NOTE: Only one current general partner is required to sign removing a "limited liability limited partnership" election state.	nent. Chapter 620, F.S., requires all gene	ral partners to	sign
when adding or removing a "limited liability limited partnership GATOR FUND PARTNERS. MC	r" election statement.)	Handa Salah	
By: MA)	• . •	골증	AFT O
Seth D. Ellis, Manager			r
	**************************************		
	<u></u>		
Signature(s) of all new or dissociating general par	iner(s), ii any:		
			<del></del>
Filing Fee: \$52.50			
Certified Copy (optional): \$52.50 Certificate of Status (optional): \$8.75			